IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application

James F. Zucherman Inventor(s):

SC/Serial No.: 09/684,017

Confirm. No.: 9622

January 8, 2001 Filed:

Title: SPINE DISTRACTION IMPLANT AND METHOD

PATENT APPLICATION

Art Unit:

3731

Examiner:

Julian W. Woo

Customer No. 23910

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8

I hereby certify that this correspondence is being deposited in the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Art Unit 3731, Commissioner for Patents, Washington, DC 20231, on April 2, 2003.

(Attorney Signature)

Sheldon R. Meyer, Reg. No. 27,660 Signature Date: April 2, 2003

RESPONSE TRANSMITTAL LETTER

TECHNOLOGY CENTER R3700

Art Unit 3731 Commissioner for Patents Washington, DC 20231

Sir:

Transmitted with this communication in connection with the above-identified application are the following:

A Response under 37 C.F.R. §1.111 to the Office Action dated January 2, 2003.

A Response under 37 C.F.R. §1.116 to the Office Action dated _____.

A Petition for an Extension of Time under 37 C.F.R. §1.136.

A Statement pursuant to 37 C.F.R. §1.27 to establish small entity status under 37 C.F.R. §1.9(f).

An Information Disclosure Statement pursuant to 37 C.F.R. §1.56.

	The fe	ee associ	ated with this	commu	nication l	has been	calculated as	shown be	elow:		
		_	No fee is required with this communication.								
		_	Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been established.								
		_	A fee for extension of time for response under 37 C.F.R. §1.136 filed within _ month(s) after the original time for response of \$ is due.								
			A fee of \$180.00 is due for the submission of the accompanying Information Disclosure Statement.								
			A fee for add	dition of	claims u	ınder 37	C.F.R. §1.16	is due as	follows:		
Claims Remain	ina		Highest				Rate Small Entity	u/			
Remaining After			Previously Number			Other Than					
Amendment			Paid For	•			Small Entity				
Total							\$ 9.00	<u></u>			
Claims	_23_	-	24	=	<u>0</u> *	X	\$18.00	=	\$ -0-		
 Independent							\$42.00				
Claims	_18_	-	15	=	<u>3</u> *	X	\$84.00	=	\$ 126.00		
First Pro	esentat	tion of					\$140.00				
Multiple	e Depe	endent C	laim(s)				\$280.00	=	\$ -0-		
*If the o	liffere	nce is le	ss than zero, e	nter "0".		· · · · · · · · · · · · · · · · · · ·					
							Additional l	Fee =	\$ <u>126.00</u>		
	The total fee required with this communication is \$						and is to be paid as follows:				
		_	Please charge copy of this				5-1325 in the a	mount of	f \$ A du	plicate	
	ſ		A check in the	ne amou	nt of \$ 1'	26.00 i	s enclosed				

<u> </u>	The Commissioner is hereby authorized to charge underpayment of any fees, including the following fees, associated with this communication or credit any overpayment to Deposit Account No. 06-1325. A duplicate copy of this authorization is enclosed.								
	Any filing fees under 37 C.F.R. §1.16 for the presentation of additional claims.								
<u> </u>	Any patent application processing fees under 37 C.F.R. §1.17 including any applicable fee for extension of time.								
	Respectfully submitted,								
Date:	## By:								

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